

# ACTIVITIES BOOKING FORM



This form is to be completed by or on behalf of the Participant, and signed by a duly authorised parent, guardian or carer (“the Signatory”)

An Activities Booking Form must be completed for each child and for each activity attended to confirm key information about the Participant. If the Participant does not have a User ID then you **MUST** also complete a Database Registration Form.

By signing this form, you confirm that the information provided on the Database Registration Form already completed remains valid, and that you have read the Terms & Conditions overleaf.

Completed forms should be returned with payment to: *Millwall Community Scheme, The Den, Zampa Road, London SE16 3LN*. Cheques should be made payable to “Millwall Community Scheme”. Debit/Card card payments can be made by phoning 020 7740 0503 and quoting your User ID, but an Activities Booking Form will still have to be completed on arrival for the activity.

## PARTICIPANT’S DETAILS (BLOCK LETTERS)

First name:	Surname:
User ID (if you do not have one, please fill out a Database Registration Form):	
Activity attending:	
Date/s:	Location:

## EMERGENCY CONTACT DETAILS (in case of an accident or emergency who should we contact?)

Name:	Relationship to Participant: (e.g. parent, guardian, carer or other)	
Address: (if different from Participant’s)		
Home Tel No:	Work Tel No:	Mobile Tel No:

## INFORMATION ABOUT THE PARTICIPANT

<b>A.</b> Does the Participant have any injuries, weaknesses, medical conditions, special needs or allergies which may affect, or may be affected by, exercise or physical contact? <i>Please tick relevant box</i>	<b>Yes</b>	
	<b>No</b>	
If yes, please state problem and any action or medication required and/or any activity in which the Participant should not be involved:		
<b>Please note: Coaches are not permitted to administer medicine, or take responsibility for medicines. The Participant is responsible for ensuring any medication required is available and taken correctly.</b>		
<b>B.</b> Will the Participant be collected at the end of the activity? <i>Please tick relevant box</i>	<b>Yes</b>	
	<b>No</b>	
If yes who will collect him / her? (if not specified, the Participant will be allowed to leave without supervision)		
<b>C.</b> How did you receive information on, or hear about, this particular course:		
<b>Flyer from:</b>	Direct Mail <input type="checkbox"/>	E-mail <input type="checkbox"/>
<b>Advert in:</b>	Match Day Programme <input type="checkbox"/>	Website <input type="checkbox"/>
	Lions Centre <input type="checkbox"/>	School <input type="checkbox"/>
	Other (please state)	

## ACCEPTANCE AND CONFIRMATION

I confirm that: I have read and understood the terms and conditions overleaf; that all relevant information supplied about the Participant is correct and I accept on behalf of myself and the Participant all such conditions. I have full authority to sign on behalf of the Participant and I am over 16 years of age. I have signed a Database Registration Form for this Participant and agree the consents on that form remain valid.		
Name of Signatory (Block letters):		Status (eg, parent, guardian or carer):
Signature:		Date:

## FOR OFFICE USE ONLY

Booking Date		Booking Officer		Total Paid	
Payment Type		Booking Reference			

## Millwall Community Scheme (“the Scheme”) – Activities Booking Terms and Conditions

1. An Activities Booking Form must be completed for each child for each course and signed by a duly authorised parent, carer or guardian (“the Signatory”).
2. A Database Registration Form must also be completed if one has not already been signed for the relevant year (running July to June)
3. All information supplied under Section A must be complete and accurate. Please make sure the Signatory clearly states any medical conditions or disability the Participant has.
4. The Signatory must state whether the Participant will be collected at the end of the activity in Section B. **If this is not specified, the Participant will be allowed to leave without supervision.** Please ensure that your child is collected promptly at the end each activity. Children will only be supervised during the activity times stated. Please note it is the responsibility of the Signatory to sign their child in and out at the appropriate times and not an hour before or after!
5. It is the policy of the Scheme to take all reasonable care in the provision of services relating to the activity/activities including using properly trained staff and safe premises. However, in any activities involving exercise and bodily contact accidents may occur and neither the Scheme, nor its employees, agents or third parties, whether involved in the activity or otherwise shall be under any liability whatsoever to the Participant, or any other person in respect of any injury, damage or loss to person or property howsoever arising during the activity and/or whilst on or about the premises used or occupied by the Scheme.
6. The Signatory to this form agrees that the Participant may be given emergency treatment without referral to him/her and in his/her absence.
7. The Participant must attend with the appropriate dress and equipment.
8. The Scheme reserves the right to cancel any activity (even at short notice) for reasons such as, but not limited to, weather conditions or staffing problems. Whenever this situation arises, we will endeavour to give notice and suggest alternative activities where possible.